

### ***Caution: DRAFT FORM***

This is an advance proof copy of an IRS tax form. It is subject to change and OMB approval before it is officially released. You can check the scheduled release date on our web site ([www.irs.gov](http://www.irs.gov)).

If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

**Income Tax Return for Single and  
Joint Filers With No Dependents (99) 2004****Label**

(See page 12.)

**Use the IRS  
label.**Otherwise,  
please print  
or type.**Presidential  
Election  
Campaign**  
(page 12) L  
A  
B  
E  
L  
  
H  
E  
R  
E

Your first name and initial

Last name

If a joint return, spouse's first name and initial

Last name

Home address (number and street). If you have a P.O. box, see page 12.

Apt. no.

City, town or post office, state, and ZIP code. If you have a foreign address, see page 12.

Your social security number

Spouse's social security number

**▲ Important! ▲**You **must** enter your  
SSN(s) above.

<b>You</b>	<b>Spouse</b>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Note.** Checking "Yes" will not change your tax or reduce your refund.

Do you, or your spouse if a joint return, want \$3 to go to this fund?

**Income****Attach  
Form(s) W-2  
here.**Enclose, but  
do not attach,  
any payment.**Note.** You  
**must** check  
Yes or No. **1** Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2.  
Attach your Form(s) W-2.

1

**2** Taxable interest. If the total is over \$1,500, you cannot use Form 1040EZ.

2

**3** Unemployment compensation and Alaska Permanent Fund dividends  
(see page 14).

3

**4** Add lines 1, 2, and 3. This is your **adjusted gross income**.

4

**5** Can your parents (or someone else) claim you on their return?**Yes.** Enter amount from  
☐ worksheet on back.**No.** If **single**, enter \$7,950.  
If **married filing jointly**, enter \$15,900.  
See back for explanation.

5

**6** Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-.  
This is your **taxable income**. 

6

**Payments  
and tax****7** Federal income tax withheld from box 2 of your Form(s) W-2.

7

**8a Earned income credit (EIC).**

8a

**b** Nontaxable combat pay election.

8b

**9** Add lines 7 and 8a. These are your **total payments**. 

9

**10 Tax.** Use the amount on **line 6 above** to find your tax in the tax table on pages  
24–28 of the booklet. Then, enter the tax from the table on this line.

10

**Refund**Have it directly  
deposited! See  
page 19 and fill  
in 11b, 11c,  
and 11d.**11a** If line 9 is larger than line 10, subtract line 10 from line 9. This is your **refund**. 

11a

**b** Routing number **c** Type: ☐ Checking ☐ Savings **d** Account number**Amount  
you owe****12** If line 10 is larger than line 9, subtract line 9 from line 10. This is  
the **amount you owe**. For details on how to pay, see page 20. 

12

**Third party  
designee**Do you want to allow another person to discuss this return with the IRS (see page 20)? ☐ **Yes.** Complete the following. ☐ **No**Designee's  
name Phone  
no. ( )Personal identification  
number (PIN) **Sign  
here**Joint return?  
See page 11.  
Keep a copy  
for your  
records. Under penalties of perjury, I declare that I have examined this return, and to the best of my knowledge and belief, it is true, correct, and  
accurately lists all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based  
on all information of which the preparer has any knowledge.

Your signature

Date

Your occupation

Daytime phone number

Spouse's signature. If a joint return, **both** must sign.

Date

Spouse's occupation

**Paid  
preparer's  
use only**Preparer's  
signature 

Date

Check if  
self-employed ☐

Preparer's SSN or PTIN

Firm's name (or  
yours if self-employed),  
address, and ZIP code 

EIN

Phone no. ( )